



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
2300 E STREET NW
WASHINGTON DC 20372-5300

IN REPLY REFER TO

BUMEDINST 5210.9A
BUMED-914
19 Apr 2001

BUMED INSTRUCTION 5210.9A

From: Chief, Bureau of Medicine and Surgery

Subj: FORMS AND REPORTS MANAGEMENT PROGRAM

Ref: (a) SECNAVINST 5213.10D
(b) SECNAVINST 5214.2B
(c) SECNAVINST 5210.11D

Encl: (1) Forms Management
(2) Reports Management

1. Purpose

a. To implement references (a) and (b) at the Bureau of Medicine and Surgery (BUMED) and throughout the Navy Medical Department. To provide policies and procedures to further clarify references (a) and (b) at BUMED and throughout the Navy Medical Department. This instruction is significantly revised and should be read in its entirety.

b. To ensure all Medical Department personnel keep forms simple, practical, and up to date; to minimize the burden imposed by reports; to expedite the flow of information through the use of technological advances; and to minimize costs in these areas. References (a) through (c) are available electronically at: <http://neds.nebt.daps.mil/Directives/dirindex.html>.

2. Cancellation. BUMEDINST 5210.9.

3. Responsibilities

a. BUMED

(1) The Regulations and Directives Branch, MED-914 is responsible for the following:

(a) The administration of the Forms and Reports Management Program at Navy Medical Department activities (the NAVMED Forms and Reports Program). This includes issuing a program directive, assigning responsibilities, and providing general program guidance.

(b) The administration of the Headquarters (HQ) BUMED Forms and Reports Management Program.

b. Navy Medical Department Activities. Commanding officers and officers in charge are to assign responsibilities to specific individuals to ensure accountability for the implementation and administration of forms and reports management programs. The assignment of program

management responsibilities is at the discretion of the commanding officer or the officer in charge, recognizing the need for latitude in managing the subject programs to meet the specific requirements of the activity. The following are provided as general guidance:

(1) Appoint one individual as the Forms and Reports Management Officer with total program responsibility. Provide the following information to MED-914 via fax at DSN 762-0035 or Commercial (202) 762-0035: individual's name, code, telephone number (Commercial and DSN), fax number, e-mail address, and activity mailing address.

(2) Delegate full authority to administer assigned program elements to the responsible individual.

(3) Review program requirements and assess compliance to ensure requirements are being executed.

(4) Ensure activity forms do not duplicate higher echelon forms in any way.

(5) Ensure activity forms are not used for information placed in a medical or dental record. All forms placed in a medical or dental record shall, at a minimum, be NAVMED forms.

4. Action. Implement enclosures (1) and (2), which prescribe the procedures for administering forms and reports programs.

5. Forms. OPNAV 5213/19 (Rev. FEB 1993), Request for New or Revised Form, and OPNAV 5214/10 (Rev. SEP 1981), Report Analysis Data, are available electronically at: <http://neds.nebt.daps.mil/directives/navyforms.htm>.

6. Report Exemption. The requirements contained in paragraph 3b(1) are exempt from reports control per reference (b), part IV, paragraph G8.



D. C. ARTHUR
Deputy

Distribution:

All Internal BUMED Codes

SNDL, C28G (BRDENCLINIC)
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FA48 (NAVDENCEN)
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FC18 (NAVDENCEN)
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BUMEDINST 5210.9A

19 Apr 2001

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V12 (MCCDC QUANTICO)

V16 (CG MCB CAMP BUTLER, CAMP LEJEUNE, and CAMP PENDLETON
only)

Available at: <http://navymedicine.med.navy.mil/instructions/external/external.htm>

FORMS MANAGEMENT

1. Forms Management Program Responsibilities

a. Bureau of Medicine and Surgery (BUMED)

(1) The Regulations and Directives Branch, MED-914, is responsible for:

(a) The forms program management and administration at Navy Medical Department activities. This responsibility encompasses:

1. Navy Medicine (NAVMED) Forms, Department of Defense (DD) Forms, Standard Forms (SF), and Optional Forms (OF) standardized by a Federal Government agency for use by Navy Medical Department activities.

2. Maintenance of the Manual of the Medical Department (MANMED), chapter 23, section II.

3. Printing, digitization, distribution, and inventory, of NAVMED forms and those OF, SF, and DD forms under BUMED sponsorship.

(a) Forms distributed via electronic means (various Web sites) may be downloaded for activity use. Navy Medical Department activities are authorized to print (at their own expense) an adequate supply to support the activity for a period not to exceed 2 years.

(b) The supply of forms authorized in paragraph 1a(1)(a)3(a) shall be kept within the activity.

(b) The forms program administration and guidance of HQ BUMED Forms Management Program (BUMED Forms), including:

1. BUMED and other standardized forms for use by HQ BUMED.

2. Design of BUMED departmental forms (those for use within HQ BUMED only).

b. Navy Medical Department Activities. The Forms Manager at each Navy Medical Department activity is responsible for:

(1) Developing a forms management program that fulfills the requirements of this instruction and the requirements of reference (a). Using the format in MANMED, chapter 23, section II, maintaining an up to date tabulation of all activity (local) forms; if desired, an electronic spreadsheet format or database system may be used.

19 Apr 2001

(2) Obtaining from the originating department full construction documentation (also known as specifications or specs) and justification for all proposed forms, and requiring directive or other administrative issuance which prescribe the use of the form, relevant background information, and a completed OPNAV 5213/19, Request for New or Revised Form. The OPNAV 5213/19 shall be signed by the cognizant forms manager.

(3) Assigning form numbers based on the Department of the Navy File Maintenance Procedures and Standard Subject Identification Codes (SSIC). SSICs are provided in reference (c).

(4) Maintaining a master list of all form numbers assigned, both current and cancelled, showing either directive or canceling directive, cognizant code, and any related report control symbol. If desired, this information may be kept in an electronic spreadsheet format or database system.

(5) Maintaining a separate file for each activity form and filing each file in numerical order according to the form number.

(6) Ensuring activity forms do not duplicate higher echelon forms in any way.

(7) Conducting and documenting an annual review of all forms to evaluate continuing need, improvement or revision, and in the event of duplication of information, elimination of that form.

2. Initiating, Revising, or Canceling Forms

a. Initiating Forms. Departments developing new forms shall submit proposed form to the cognizant forms manager, with sufficient lead-time (4-6 months for flatsheet forms and 6-8 months for specialty forms) for analysis, clearance, design, printing, and stocking action. All NAVMED forms shall be sponsored by a HQ BUMED code. Activity forms shall not duplicate higher echelon forms in any way. If you need assistance, contact the NAVMED/BUMED Forms Manager.

b. Revising or Canceling Forms. Departments and sponsors desiring to revise or cancel forms must submit a written request stating the reason for revision or cancellation, to the cognizant forms manager. The OPNAV 5213/19, Request for New or Revised Form shall be completed, if applicable. For NAVMED forms this request must be forwarded by or via the HQ BUMED Forms Sponsor (refer to paragraph 2a of this enclosure) to the NAVMED/BUMED Forms Manager.

c. Clearance of Proposed or Revised Forms. Before submission of a proposed or revised form, originators or sponsors must determine and obtain necessary clearances from other interested departments within their activity and within the Navy Medical community.

d. Submission of Material. Originators must submit (four copies for NAVMED forms) the following material to the cognizant forms managers via their chain of command:

(1) A completed OPNAV 5213/19, Request for New or Revised Form; this will be signed by the cognizant forms manager.

(2) A draft of the new or revised form (i.e., four identical copies for NAVMED forms) that clearly shows the changes made from the currently used form. If it's a new or totally revised form, forward the form it will be replacing; if it's not replacing anything, state the reason for the form.

(3) A copy of the proposed directive or other administrative issuance which prescribes the use of the form and all pertinent background data. In the case of a revised form, an update of the current directive or other administrative issuance that describes the changes made to the form, the reason for those changes, and any new or revised procedures for completing the form.

e. Action by Cognizant Forms Manager. Upon receipt of the material listed in paragraph 2d, the cognizant forms manager must analyze the proposed new or revised form in conjunction with related directives or other administrative issuance. If approved:

(1) Obtain any necessary higher echelon clearances or approvals.

(2) Request or assign a form number and create a form file.

(3) Provide technical assistance in the design, writing of specifications, and construction of the form. This may be accomplished using Department of Defense approved software for developing digital (electronic) forms.

(4) Refer drafts of forms that are required to be stocked to publication managers or other pertinent personnel for development of camera proofs.

(5) Return camera proofs to the originator for review and approval.

(6) Submit the approved proof form for printing and stocking action. Provide the forms sponsor with an approved proof for use in finalizing the directive or other administrative issuance required for all forms.

f. If a Form is Disapproved, the cognizant forms manager returns all material to the originating code, indicating the reason for disapproval, and any corrective action that might be appropriate.

3. Annual Forms Review. An annual review of all forms shall be conducted and documented to determine continuing need, improvement, revision, or cancellation.

19 Apr 2001

4. Request for Overprints of Higher Echelon Forms. Overprinting of higher echelon forms is allowed per reference (a). Form managers at Navy Medical Department activities are authorized to approve overprint of higher echelon forms for repetitive information using the following guidelines:

a. Overprints are permissible for stable data and repetitive information, provided the information is consistent with the intent of the form and the following criteria:

(1) Items such as medications or procedures are NOT authorized for overprint.

(2) Stable data and repetitive information such as activity name, address, telephone number, etc., are allowable overprints.

(3) Overprints of approved release statements may be authorized; an authorization number shall be obtained. Using the OPNAV 5213/19, Request for New or Revised Form, forward requests to the NAVMED/BUMED Forms Manager for review and submission up the chain for approval and an authorization number. Enclose four copies of the sample form (the way you want the form to appear if the overprint is approved).

b. Approved overprints shall be digitized by the appropriate forms manager and provided to users, on the Navy Medicine Web site at: <http://navymedicine.med.navy.mil/instructions/external/external.htm>.

c. Submit requests for changes to text or construction to the cognizant forms manager, who shall submit for higher echelon approval, if required.

5. BUMED Assistance. The NAVMED/BUMED Forms Manager is available to Navy Medical Department activities for additional information or other assistance in managing or improving their forms management program. Contact the NAVMED/BUMED Forms Manager at DSN 762-3250 or Commercial (202) 762-3250 or by fax at DSN 762-0035 or Commercial (202) 762-0035.

REPORTS MANAGEMENT

1. Reports Management Program Responsibilities

a. Bureau of Medicine and Surgery (BUMED)

(1) The Regulations and Directives Branch, MED-914, is responsible for:

(a) Program administration and guidance of the Reports Management Program at Navy Medical Department activities. This responsibility encompasses:

1. Reports that BUMED requires from Navy Medical Department activities, other military services, Federal Government agencies, and the general public. These reports are referred to as NAVMED Reports.

2. Maintenance of the Manual of the Medical Department (MANMED), chapter 23, section I.

(b) Program administration and guidance of the HQ BUMED Reports Management Program including:

1. Internal BUMED one-time and recurring reports required by one directorate from another. These reports are referred to as BUMED Reports.

2. Reports BUMED requires from other HQ Navy Department activities.

3. Reports BUMED prepares for higher authority.

b. Navy Medical Department Activities. The Reports Manager at each Navy Medical Department activity is responsible for:

(1) Developing an Activity Reports Management Program to meet the requirements prescribed by this instruction and reference (b). The program must include a complete tabulation of all activity (local) reporting requirements and all reporting requirements of higher authority (excluding Navy Medical Department reporting requirements in MANMED). Prepare the tabulation of required reports using the same format shown in MANMED, chapter 23, section I; if desired, an electronic spreadsheet format or database system may be used.

(2) Assigning Report Control Symbols and maintaining a master list of all report control symbols assigned, and the symbols for current and cancelled reports. Reporting requirements must be revalidated every 3 years per reference (b).

(a) Assign an activity report control symbol. Only the NAVMED/BUMED Reports Manager (MED-914) is authorized to assign NAVMED or BUMED report control symbols.

Enclosure (2)

19 Apr 2001

(b) Return requests to the originator with approval of the reporting requirements and any pertinent comments.

(3) Disapproved Reports. If disapproved, or more information is required, return the material to the originator indicating the reason for disapproval.

(4) Canceling Reports. Reports sponsors desiring to revise or cancel a report must submit a written request to the cognizant reports manager via the chain of command using the OPNAV 5214/10.

2. Reporting Requirements Without Report Control Symbols. Navy Medical Department activities are not required to respond to any reporting requirement, except designated as exempt from reports control, that do not have a report control symbol assigned.

3. BUMED Assistance. The NAVMED/BUMED Reports Control Manager is available to Navy Medical Department activities for additional information or other assistance in managing or improving their Reports Management Program. Contact the NAVMED/BUMED Reports Control Manager for assistance at DSN 762-3250 or Commercial (202) 762-3250 or by fax at DSN 762-0035 or Commercial (202) 762-0035.